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CLAIMS ONLY						SERIAL NO.		FILING DATE			
						APPLICANT(S)					
CLAIMS											
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*			
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1						51	1				
2	2					52					
3	1					53					
4	1					54					
5	1					55					
6	1					56					
7						57					
8	1					58					
9						59	1				
10	1					60	1	1			
11	1					61	1	1			
12	1					62	1	1			
13	1					63					
14	1					64	1				
15	1					65		1	1		
16	1					66		1			
17						67					
18						68					
19						69					
20	1					70					
21	1					71					
22	1					72					
23	1					73					
24	1					74					
25						75					
26						76					
27						77					
28						78					
29						79					
30						80					
31						81					
32						82					
33						83					
34						84					
35						85					
36	1					86					
37	1					87					
38	1					88					
39	1					89					
40	1					90					
41						91					
42	1					92					
43	1					93					
44	1					94					
45	1					95					
46	1					96					
47	1					97					
48	1					98					
49	1					99					
50	1					100					
TOTAL IND.						TOTAL IND.	24				
TOTAL DEP.						TOTAL DEP.	22				
TOTAL CLAIMS						TOTAL CLAIMS	65				

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)						SERIAL NO. 10/47987	FILING DATE					
						APPLICANT (6)						
CLAIMS												
CLAIM NO.	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
101	/	/	/	/			51					
102	/	/	/	/			52					
103	/		/				53					
104	/		/				54					
105	/		/				55					
106	/		/				56					
107	/		/				57					
108	/		/				58					
109	/		/				59					
110	/		/				60					
111	/		/				61					
112	/		/				62					
113	/		/				63					
114	/		/				64					
115	/		/				65					
116	/		/				66					
117	/		/				67					
118	/		/				68					
119	/		/				69					
120	/		/				70					
121	/		/				71					
122	/		/				72					
123	/		/				73					
124	/		/				74					
125	/		/				75					
126	/		/				76					
127	/		/				77					
128	/		/				78					
129	/		/				79					
130	/		/				80					
131	/		/				81					
132	/		/				82					
133	/		/				83					
134	/		/				84					
135	/		/				85					
136	/						86					
137	/						87					
138	/						88					
139	/						89					
140	/						90					
141	/						91					
142	/						92					
143	/						93					
144	/						94					
145	/						95					
146	/						96					
147							97					
148							98					
149							99					
150							100					
TOTAL IND.	9		1				TOTAL IND.					
TOTAL DEP.	73	↓	49	↓			TOTAL DEP.					
TOTAL CLAIMS	82		50				TOTAL CLAIMS					

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*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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